Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	✓ Chapter 7	
	Chapter 11	
	Chapter 12	
	Chapter 13	Check if this is a amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Part 1: Identify Yourself							
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Kenneth First name  Tyrone Middle name  Henderson Last name and Suffix (Sr., Jr., II, III)		Sheila First name  Ann Middle name  Henderson Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years							
	Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4001		xxx-xx-2302				

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Kenneth Tyrone Henderson Debtor 1 Debtor 2 Sheila Ann Henderson Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have ✓ I have not used any business name or EINs. ✓ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 7532 Tynewind Wake Forest, NC 27587 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Wake County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for

# bankruptcy



Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

	_		
	- 1		
	- 1		
_	_		

I have another reason. Explain. (See 28 U.S.C. § 1408.) Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reaso
Explain, (See 28 U.S

S.C. § 1408.)

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	Debtor 2 Sheila Ann Henderson			Case number (if known)		
Por	t 2: Tall the Court About 1	Your Bonkruntov	Casa			
7.	The chapter of the	Check one. (For	a brief description of		11 U.S.C. § 342(b) for Individuals Filing for Bar	nkruptcy
	Bankruptcy Code you are choosing to file under		so, go to the top of	page 1 and check the appropriat	e box.	
	-	✓ Chapter 7				
		Chapter 11				
		Chapter 12				
		Chapter 13				
8.	How you will pay the fee	about how order. If yo	you may pay. Typi	cally, if you are paying the fee yo	k with the clerk's office in your local court for mourself, you may pay with cash, cashier's check alf, your attorney may pay with a credit card or	k, or money
I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).						
		ū		,	n only if you are filing for Chapter 7. By law, a ju	udge mav.
		but is not r	equired to, waive y	our fee, and may do so only if yo	our income is less than 150% of the official pove	erty line that
					n installments). If you choose this option, you model Form 103B) and file it with your petition.	nust fill out
				,	, , , , , , , , , , , , , , , , , , , ,	
9.	Have you filed for bankruptcy within the	✓ No.  Yes.				
	last 8 years?		ot.	When	Case number	
		Distri Distri	-	When	Case number	
		Distri	-	When	Case number	
		Distil	,	WITEH	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No  Yes.				
		Debto	or		Relationship to you	
		Distri	ot	When	Case number, if known	
		Debto	or		Relationship to you	
		Distri	t	When	Case number, if known	
11.	Do you rent your	✓ No. Go t	o line 12.			
	residence?	<del></del>	your landlord obta	ined an eviction judgment agains	st you?	
			No. Go to line 1		•	
				tial Statement About an Eviction	Judgment Against You (Form 101A) and file it a	as part of

Case 20-01340-5-DMW Doc 1 Filed 03/26/20 Entered 03/26/20 16:21:19 Page 4 of 63 Debtor 1 Kenneth Tyrone Henderson Debtor 2 Sheila Ann Henderson Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ✓ No. Go to Part 4. business? Name and location of business Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) П Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ✓ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and Yes.

I do not choose to proceed under Subchapter V of Chapter 11.

I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and Yes.

I choose to proceed under Subchapter V of Chapter 11.

#### Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4:

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

✓ No.

Yes. What is the hazard?

> If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Case 20-01340-5-DMW Doc 1 Filed 03/26/20 Entered 03/26/20 16:21:19 Page 5 of 63 Debtor 1 Kenneth Tyrone Henderson Debtor 2 Sheila Ann Henderson Case number (if known) Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5: About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. so, you are not eligible to of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your from an approved agency, but was unable to obtain services from an approved agency, but was creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so. Active duty. Active duty.

I am currently on active military duty in a

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

military combat zone.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

combat zone.

of credit counseling with the court.

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	btor 1 Kenneth Tyrone Henderson Sheila Ann Henderson Case number (if known)						
Part	6: Answer These Questi	ons for Re	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consum individual primarily for a personal, f			e defined in 11 U.S.C. § 101(8) as "incurred by an	
			No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busines money for a business or investmen				
			No. Go to line 16c.				
			✓ Yes. Go to line 17.				
		16c.	State the type of debts you owe that 3 Failed Pizza Stores	at are not consun	ner debts or bus	siness debts	
17.	Are you filing under Chapter 7?	☐ No.	lo. I am not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<b>V</b> Yes.	I am filing under Chapter 7. Do you are paid that funds will be available   ✓ No  ✓ Yes			property is excluded and administrative expenses itors?	
18.	How many Creditors do you estimate that you owe?	✓ 1-49	99	1,000-5,000 5001-10,000 10,001-25,00	)	25,001-50,000 50,001-100,000 More than100,000	
19.	How much do you estimate your assets to be worth?	\$50,0 \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	\$50,000,001	- \$10 million - \$50 million - \$100 million 01 - \$500 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion	
20.	How much do you estimate your liabilities to be?	\$50,0 \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	= ' ' '	- \$50 million - \$100 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion	
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I declare un	nder penalty of p	erjury that the in	information provided is true and correct.	
						gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.	
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571.					
		/s/ Kenneth Tyrone Henderson			/s/ Sheila Ani		
			n Tyrone Henderson e of Debtor 1		Sheila Ann H Signature of De		
		Executed	March 26, 2020 MM / DD / YYYY			March 26, 2020 MM / DD / YYYY	
			ואוואו / טט / ז ז ז ז			IVIIVI / DD / TTTT	

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Debtor 1 Kenneth Tyrone He Debtor 2 Sheila Ann Hender		Case number (if known)			
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, under Chapter 7, 11, 12, or 13 of title 11, United State for which the person is eligible. I also certify that I ha	s Code, and have e	xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certify schedules filed with the petition is incorrect.	that I have no know	ledge after an inquiry that the information in the		
. •	/s/ William F. Braziel III Signature of Attorney for Debtor	Date	March 26, 2020 MM / DD / YYYY		
	William F. Braziel III 39541				
	Janvier Law Firm, PLLC Firm name				
	311 East Edenton Street Raleigh, NC 27601 Number, Street, City, State & ZIP Code				
	Contact phone 919-582-2323	Email address			
	39541 NC Bar number & State				

Fill	in this information	n to identify your	case:			
		enneth Tyrone H				
		st Name	Middle Name	Last Name		
		neila Ann Hendei				
(Spo	ouse if, filing) Fire	st Name	Middle Name	Last Name		
Uni	ited States Bankrup	tcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA		
Cas	se number					
	nown)				☐ Chec	ck if this is an
					amer	nded filing
Of	ficial Form	106Sum				
			and Liabilities an	d Certain Statistical Information	on	12/15
				are filing together, both are equally responsi		
				e information on this form. If you are filing an	nended sched	ules after you file
you	r originai forms, ye	ou must fill out a l	new Summary and check	the box at the top of this page.		
Par	t 1: Summarize	Your Assets				
					Your a	assets
					Value	of what you own
1.	Schedule A/B: P	roperty (Official Fo	orm 106A/B)		_	404 000 00
	1a. Copy line 55,	Total real estate, fr	om Schedule A/B		\$	431,300.00
	1b. Copy line 62,	Total personal prop	perty, from Schedule A/B		\$	28,474.00
	1c. Copy line 63.	Total of all property	on Schedule A/B		\$	459,774.00
					•	400,774.00
Par	t 2: Summarize	Your Liabilities				
						liabilities
					Amoul	nt you owe
2.			aims Secured by Property	,	D \$	359,060.00
	2a. Copy the total	I you listed in Colur	nn A, <i>Amount of claim,</i> at t	the bottom of the last page of Part 1 of Schedule	<i>D</i> Ψ	000,000.00
3.			Unsecured Claims (Official	Form 106E/F) s) from line 6e of Schedule E/F	\$	0.00
	sa. Copy the tota	ii ciaims irom Part	r (priority unsecured claim	s) from line 6e of Schedule E/F		0.00
	3b. Copy the total	al claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	955,787.74
				Your total liabil	lities \$	1,314,847.74
Par	t 3: Summarize	Your Income and	Expenses			
4.		Income (Official Fo				0.040.00
	Copy your combine	ned monthly income	e from line 12 of Schedule	1	\$	6,043.63
5.	Schedule J: Your	Expenses (Official	Form 106J)		•	6.019.63
	Copy your month	ly expenses from li	ne 22c of Schedule J		\$	6,018.63
Par	Answer The	ese Questions for	Administrative and Stati	stical Records		
6.	Are you filing for	r bankruptcy unde	er Chapters 7, 11, or 13?			
	☐ No. You have	e nothing to report	on this part of the form. Ch	neck this box and submit this form to the court wi	th your other so	chedules.
	Yes					
7.	What kind of del	ot do you have?				

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debioi	Sheila Ann Henderson	Case number (If known)	
	om the Statement of Your Current Monthly Income: C 2A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1	opy your total current monthly income from Official Form Line 14.	\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Kenneth Tyrone Henderson

	Tota	I claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

### Case 20-01340-5-DMW Doc 1 Filed 03/26/20 Entered 03/26/20 16:21:19 Page 10 of 63

Fill in	this informat	ion to identify	your case and th	is filin	g:			
Debto	r 1	Kenneth Tyr	one Henderson		-			
20010	_	First Name		Name	Last Name			
Debto	_	Sheila Ann F		Name	Last Name			
(Spouse	, 3,							
United	l States Bankr	uptcy Court for	the: EASTERN	DISTR	ICT OF NORTH CAROLINA			
Case r	number							☐ Check if this is an
								amended filing
Offic	cial Form	า 106A/E	3					
Sch	nedule	A/B: Pi	roperty					12/15
				an asse	t only once. If an asset fits in more than one	category, li	st the asset in	the category where you
					married people are filing together, both are his form. On the top of any additional pages			
	every question		attaon a separate si	1001 10 1	ms form. On the top of any additional pages	, write your	iame and ease	, namber (ii known).
Part 1:	Describe Eac	h Residence, B	uilding, Land, or Ot	her Rea	I Estate You Own or Have an Interest In			
і. Во у	ou own or have	e any legal or ec	juitable interest in a	ny resid	dence, building, land, or similar property?			
□ N	o. Go to Part 2.							
Y	es. Where is the	e property?						
1.1				Wha	t is the property? Check all that apply			
_	532 Tynewir	nd Dr. ailable, or other des	ecription	the amount			deduct secured claims or exemptions. Put	
3	ireet address, ii av	allable, of other des	scription				of any secured claims on Schedule D: Who Have Claims Secured by Property.	
					Condominium or cooperative			
					Manufactured or mobile home	Current va	alue of the	Current value of the
V	Vake Forest	NC	27587-4959		Land	entire pro		portion you own?
С	ity	State	ZIP Code		Investment property	\$4	31,300.00	\$431,300.00
								our ownership interest
				_	has an interest in the property? Check one		ee simple, tena te), if known.	ancy by the entireties, or
					Debtor 1 only	Tenants	by Entirety	
V	Vake							
С	ounty				Debtor 1 and Debtor 2 only	- Chec	k if this is com	munity property
					At least one of the debtors and another		structions)	mainty property
					r information you wish to add about this iter	n, such as lo	ocal	
					erty identification number:			
					idence chase Date: 9/28/2010			
					chase Price: \$475,000.00			
					Value: \$454,288.00			
					1): Chase			

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Debt		Case	number (if known)			
	If you own or have more than one, list here:					
1.2	Maniatt Times above	What is the property? Check all that apply  ☐ Single-family home  Do not deduct secured claims or exemptions. Put				
	Marriott Timeshare Street address, if available, or other description	☐ Single-family home	Do not deduct secured cla the amount of any secured			
	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain			
		Condominium or cooperative				
		■ Manufactured or mobile home				
		 ☐ Land	Current value of the entire property?	Current value of the portion you own?		
	City State ZIP Code	☐ Investment property	\$0.00	\$0.00		
	,	■ Timeshare				
		☐ Other	Describe the nature of you (such as fee simple, tena			
		Who has an interest in the property? Check one	a life estate), if known.	incy by the entireties, or		
		☐ Debtor 1 only				
		Debtor 2 only				
•	County	Debtor 1 and Debtor 2 only				
		At least one of the debtors and another	Check if this is come (see instructions)	munity property		
		Other information you wish to add about this item property identification number:	n, such as local			
		SC(1): Marriott Vacations				
		Amt: \$18,127.00				
3. <b>C</b> a	one else drives. If you lease a vehicle, also report ars, vans, trucks, tractors, sport utility vehicles,	·	xpired Leases.			
	Yes					
3.1		p has an interest in the property? Check one Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:		
	Year: 2006 🗆 🗆	Debtor 2 only	Current value of the	Current value of the		
	Approximate mileage: 94,280	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other information:	at least one of the debtors and another				
		Check if this is community property see instructions)	\$3,500.00	\$3,500.00		
3.2		has an interest in the property? Check one	Do not deduct secured cla			
		Debtor 1 only	Creditors Who Have Clair			
		Debtor 2 only	Current value of the	Current value of the		
	· · · · · · · · · · · · · · · · · · ·	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
		at least one of the debtors and another				
	SC(1): Capital One	No. of Walter to a company	\$12,600.00	\$12,600.00		
		Check if this is community property see instructions)	Ψ12,000.00	Ψ12,000.00		
	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	•				

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

2 handguns, 1 rifle, 1 shot gun

Official Form 106A/B Schedule A/B: Property page 3

\$500.00

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Debtor 1 Debtor 2	Kenneth Ty Sheila Ann	rone Henderson Henderson		Case number (if known)	
■ Yes	s. Describe				
		Clothing			\$200.00
□ No		ewelry, costume jewelry, enga	agement rings, wedding rings, h	eirloom jewelry, watches, gems, g	old, silver \$200.00
		wedding Kings			Ψ230.00
Exan	farm animals inples: Dogs, cats	s, birds, horses			
		1 Dog			\$0.00
15. <b>Add</b>		e of all of your entries from I	Part 3, including any entries fo		\$6,600.00
	escribe Your Fina				
Do you o	own or have any	legal or equitable interest i	n any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
☐ No		ı have in your wallet, in your h		on hand when you file your petition	on
				Cash	\$200.00
Exan			counts; certificates of deposit; sh ts with the same institution, list e Institution name:	ares in credit unions, brokerage h ach.	nouses, and other similar
		17.1. Checking	Wells Fargo		\$5,574.00
<i>Exan</i> ■ No		s, or publicly traded stocks s, investment accounts with b Institution or issue	rokerage firms, money market a r name:	ccounts	
	oublicly traded s venture	stock and interests in incorp	porated and unincorporated b	usinesses, including an interes	t in an LLC, partnership, and
	s. Give specific in	nformation about them Name of entity:		% of ownership:	

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	ebtor 1 ebtor 2	Kenneth Ty Sheila Ann	rone Henderson Henderson		Case number (if known)	
			*Debts exceed asset	wn on 3/12/2020. Franchise	Kenneth (47.5%) Sheila (47.5%) %	\$0.00
20.	Negotia	able instrumen	ts include personal checks, cas	otiable and non-negotiable instrume shiers' checks, promissory notes, and ansfer to someone by signing or delive	money orders.	
	☐ Yes. (	Give specific ir	nformation about them Issuer name:			
21.	Examp  ☐ No		n IRA, ERISA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other	r pension or profit-sharing բ	olans
	■ Yes.	List each acco	unt separately.  Type of account:	Institution name:		
				State of Michigan pension		\$0.00
22.	Your sl Examp ■ No	hare of all unus ples: Agreemen		o that you may continue service or use public utilities (electric, gas, water), te		ies, or others
				Institution name or individual:		
23.	■ No			ey to you, either for life or for a numbe	r of years)	
	☐ Yes		Issuer name and description.	"" IADI E		
24.			tion IRA, in an account in a q i, 529A(b), and 529(b)(1).	ualified ABLE program, or under a	qualified state fultion pro	gram.
	Yes		Institution name and descriptio	n. Separately file the records of any in	terests.11 U.S.C. § 521(c):	
			529 for grandchild. Amount years. *Not property of the estate	approximately \$15,000.00 no con	ritbutions in last too	\$0.00
25.	Trusts,	equitable or f		other than anything listed in line 1),	and rights or powers exe	rcisable for your benefit
	Yes.	Give specific in	nformation about them			
			Kenneth T. Hend 2/14/2005 Asset: Marriott Po	erson & Sheila A. Henderson livin	g trust created	\$0.00
26.				nd other intellectual property eds from royalties and licensing agreer	ments	
		Give specific in	nformation about them			
27.	Examp		s, and other general intangible ermits, exclusive licenses, coop	es perative association holdings, liquor lic	enses, professional license	es
	■ No □ Yes.	Give specific in	nformation about them			
M	oney or p	property owed	d to you?			Current value of the portion you own?

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Debtor 1 Debtor 2	Kenneth Tyrone Henderson Sheila Ann Henderson		C	ase number (if known)	
					Do not deduct secured claims or exemptions.
□ No	efunds owed to you  Give specific information about the	em, including whether you alr	ready filed the returns and	d the tax years	ciamic of exemplicity.
		Potential Federal & State	e Tax Refunds		Unknown
■ No	y support uples: Past due or lump sum alimon Give specific information	y, spousal support, child supp	port, maintenance, divord	e settlement, property s	settlement
Exam <sub>i</sub> □ No	amounts someone owes you  pples: Unpaid wages, disability insu  benefits; unpaid loans you m  . Give specific information		nefits, sick pay, vacation	pay, workers' compens	sation, Social Security
	S	Social Security benefits			\$0.00
☐ No	nples: Health, disability, or life insurance.  Name the insurance company of e Company n Protective	each policy and list its value.	Beneficiar Kenneth Sheila A.	<i>r:</i> T. Henderson & Henderson	Surrender or refund value:
	Prudential	- Term Policy	Living Tru  Kenneth	Henderson	\$0.00
If you somed	nterest in property that is due you are the beneficiary of a living trust, one has died.  Give specific information			urrently entitled to recei	ve property because
Exam ■ No	s against third parties, whether opples: Accidents, employment dispu			or payment	
■ No	contingent and unliquidated claim	ms of every nature, includi	ng counterclaims of the	e debtor and rights to	set off claims
■ No	nancial assets you did not alread . Give specific information	ly list			

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Debto	,		Case number (if known)	
	add the dollar value of all of your entries from Part 4, includ or Part 4. Write that number here			\$5,774.00
Part 5:	Describe Any Business-Related Property You Own or Have an Int	terest In. List any real est	ate in Part 1.	
37. <b>Do</b>	you own or have any legal or equitable interest in any business-rel	ated property?		
N	o. Go to Part 6.			
□ Y	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have an Intere	st In.	
46. <b>Do</b>	you own or have any legal or equitable interest in any farn	n- or commercial fishi	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
<i>E</i> : ■ 1		st?		
ш	Yes. Give specific information			
54. <b>A</b>	add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part 8:	List the Totals of Each Part of this Form		_	
55. <b>P</b>	Part 1: Total real estate, line 2			\$431,300.00
56. <b>P</b>	Part 2: Total vehicles, line 5	\$16,100.00		
57. <b>P</b>	art 3: Total personal and household items, line 15	\$6,600.00		
58. <b>P</b>	art 4: Total financial assets, line 36	\$5,774.00		
59. <b>P</b>	art 5: Total business-related property, line 45	\$0.00		
60. <b>P</b>	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>P</b>	art 7: Total other property not listed, line 54	+\$0.00		
62. <b>T</b>	otal personal property. Add lines 56 through 61	\$28,474.00	Copy personal property total	\$28,474.00
63. <b>T</b>	otal of all property on Schedule A/B. Add line 55 + line 62			\$459 774 00

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Rev. 3/2016

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF: Kenneth Tyrone Henderson Sheila Ann Henderson Debtor(s). CASE NUMBER:

#### SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Kenneth Tyrone Henderson and Sheila Ann Henderson</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: **(Attach additional sheets if necessary)**.

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
7532 Tynewind Dr. Wake Forest, NC 27587-4959 Wake County Residence Purchase Date: 9/28/2010 Purchase Price: \$475,000.00 Tax Value: \$454,288.00 SC(1): Chase Amt: \$330,580.00	431,300.00	J	Chase Mortgage	330,580.00	100,720.00 *Equity after cost of liquidation less than \$70,000.00	70,000.00

Debtor's Age:	
Name of former co-owner:	

#### VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 70,000.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

		Owner (D1)Debtor 1				
Model, Year Style of Auto	Market <u>Value</u>	(D2)Debtor 2 (J)Joint	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
2006 Mercedes 350 94,280 miles	3,500.00	D1			3,500.00	3,500.00

#### VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 3,500.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 0.

Description of Property	Market	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
2 handguns, 1 rifle, 1 shot gun	500.00	J			500.00	500.00
Clothing	200.00	J			200.00	200.00

Description of Property	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount <u>of Lien</u>	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Small Kitchen						
Appliances: \$200.00						
Fridge: \$250.00						
Washer & Dryer:						
\$200.00						
Living Room						
Furniture: \$450.00 Den Furniture:						
\$250.00						
Bedroom Furniture:						
\$750.00						
Dining Room						
Furniture: \$800.00						
Lawn Furniture:						
\$200.00	4 000 00				4 000 00	4 000 00
Lawnmower	4,900.00	J			4,900.00	4,900.00
TV: \$500.00						
Computer	000.00				000.00	000.00
Accessories: \$300.00	800.00	J			800.00	800.00
Wedding Rings	200.00	J			200.00	200.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 6,600.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONE-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
Prudential - Term Policy	
Beneficiary: Kenneth Henderson	0.00

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

<u>Description</u>	
-NONE-	

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity -NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
-NONE-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$

0.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal
Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retiremen
accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal
Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from
taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code"
means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

State of Michigan pension

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary
-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number
Checking: Wells Fargo
State of Michigan pension

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	of Lien	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

-NONE-

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

-NONE-

16. FEDERAL PENSION FUND EXEMPTIONS

-NONE-

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

a.	Social security benefits, 42 U.S.C. § 407	200.00
b.	Social security benefits, 42 U.S.C. § 407	5,574.00
c.	Social security benefits, 42 U.S.C. § 407	0.00

#### 18. RECENT PURCHASES

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Lien Holder	Amount of Lien	Net <u>Value</u>
-NONE-				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

# UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Kenneth Tyrone Henderson and Sheila Ann Henderson</u>, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: March 26, 2020	/s/ Kenneth Tyrone Henderson
	Kenneth Tyrone Henderson
	Debtor
	/s/ Sheila Ann Henderson
	Sheila Ann Henderson
	Dehtor 2

Debtor 1   Kenneth Tyrone Henderson   Middle Name   Last Name					•	
Debtor 2   Shelial Ann Henderson   Midde Name   Last Name   Last Name   Last Name   Check if this is an amended filling	Fill in this informati	ion to identify you	ur case:			
First Name	Debtor 1	Kenneth Tyrone	Henderson			
United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA  Case number (If twown)    Check if this is an amended filing					-	
United States Bankruptcy Court for the:  EASTERN DISTRICT OF NORTH CAROLINA  Case number (if known)  Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known)  1. Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Fart 1: List All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one erectific rhas a particular claim, list the other creditors in Part 2. As mount of claim plon to deduct the value of collateral much as possible, list the claims in alphabetical order according to the creditor's name.  2.1 Capital One Auto Finance  Describe the property that secures the claim:  Bankruptcy/ManagingAgen the Status of the date you file, the claim is: Check all that apply.  Salt Lake City, UT 84130  Number, Sireet. City, State 8. Zip Code  Nature of lien. Check all that apply.  At these to a claim claim relates to a claim secured by Property  12/15  1	Debtor 2	Sheila Ann Hend	derson			
Case number (if known)    Check if this is an amended filing	(Spouse if, filing)	First Name	Middle Name Last Name		=	
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.    Yes. Fill in all of the information below.   Part 1: List All Secured Claims   List All Secured Claims   1 a creditor has a particular claim, list the creditor's name. when has no soisle, list the claims in alphabetical order according to the creditor's name.   2. List all secured claims. If a creditor has a particular claim, list the other creditor's name. when has no soisle, list the claims in alphabetical order according to the creditor's name.   2. List all secured Claims   1 a creditor has a particular claim, list the other creditor's name. when has no creditor has a particular claim, list the other creditor's name. when has not creditor has a particular claim, list the creditor's name. when has not creditor has a particular claim. Should be a collateral, when has considered according to the creditor's name. when has considered according to the creditor's name. when has considered according to the creditor's name. Should be a collateral, when has considered according to the creditor's name. when has considered according to the creditor's n	United States Bankro	uptcy Court for the	: EASTERN DISTRICT OF NORTH CAROLI	INA		
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.    Yes. Fill in all of the information below.   Part 1: List All Secured Claims   12 creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor's name.   Yes. Fill in all of the information below.   Part 1: List All Secured Claims   12 creditor has a particular claim, list the creditor's name.   2. List all secured claims in alphabetical order according to the creditor's name.   2. List all secured claims in alphabetical order according to the creditor's name.   2. List all secured claims in alphabetical order according to the creditor's name.   2. List all secured claims   2. List all secured cla	Case number					
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number die hornown.)  1. Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. Do any creditors have claims secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the order creditors in Part 2. As mount of claim by not deduct the value of collateral that supports this claim in alphabetical order according to the creditor's name.  Attn:  Bankruptcy/ManagingAgen the property that secures the claim:  2016 Chrysler Town & Country 75,000 miles  SC(1): Capital One  Am: \$10,353.00  As of the date you file, the claim is: Check all that apply.    Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Other (including a right to offset)					☐ Check	if this is an
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in number (if known).  1. Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. List All Secured Claims. If a creditor has more than one secured claim, list the orditor separately or each claim. If more than one creditor has a particular claim, list the other creditor's name.  2. List All Secured Claims. If a creditor has more than one secured claim, list the other creditor's name.  2. List All Secured Claims in alphabetical order according to the creditor's name.  Attn:  Bankruptcy/ManagingAgen I  PO Box 30285 Salt Lake City, UT 84130 Number, Sireet, City, State & Zip Code Who owes the debt? Check one.  1. Debtor 1 only					_	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part 1: List All Secured Claims. If a creditor has more than one secured claim, list the orditor separately or each claim. If more than one creditor has a particular claim, list the other creditor's name.    List All Secured Claims. If a creditor has more than one secured claim, list the other creditor's name.    Attn:						· ·
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part 1: List All Secured Claims   List All Secured Claims   Face of the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part 1: List All Secured Claims   Face of the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part 1: List All Secured Claims   Face of the court with your other schedules. You have nothing else to report on this form.    Vealuge of collaters   Column A   Column B   Value of collaters	Official Form 1	106D				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part1: List All Secured Claims   List All Secured Claims   If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim bon to deduct the value of collateral.   2.1 Capital One Auto Finance	Schedule D	· Creditors	Who Have Claims Secure	d by Propert	V	12/15
is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part 1: List All Secured Claims   List All Secured Claims   List All Secured Claims   List All Secured claims   If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral.   Stopport   Stoppo	Scricult D	. Or Cartors	Wild Have Claims Seedic	a by i topert	<u>y                                    </u>	12/13
1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.    Part 1: List All Secured Claims   List All	is needed, copy the Ad					
□ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  ■ Yes. Fill in all of the information below.  Part 1: List All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As munt of claim Do not deduct the value of collateral that supports this claim of flam of the creditor's Name apricular claim.  2.1 Capital One Auto Finance Describe the property that secures the claim: \$10,353.00 \$12,600.00 \$0.00  Describe the property that secures the claim: \$10,353.00 \$12,600.00 \$0.00  So of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Who owes the debt? Check one. Nature of lien. Check all that apply. □ Check if this claim relates to a □ Under not	, ,	ve claims secured b	v vour property?			
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.  2.1 Capital One Auto Finance  Creditor's Name  Attn:  Bankruptcy/ManagingAgen t PO Box 30285 Salt Lake City, UT 84130 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Describe the property that secures the claim:  Contingent Contingent Unliquidated Disputed Nature of lien. Check all that apply.  As of the date you file, the claim is: Check all that apply.  Debtor 1 only Contingent Debtor 1 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a  Column A Amount of claim Do not deduct the value of collateral. Samount of claim				You have nothing else	to report on this form.	
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☐ Check if this claim relates to a ☐ Other (including a right to offset)	_	•				
	_					
		relates to a	☐ Other (including a right to offset)			
Opened 03/18 Last						

Last 4 digits of account number

1001

Active

Date debt was incurred 2/19/20

### Case 20-01340-5-DMW Doc 1 Filed 03/26/20 Entered 03/26/20 16:21:19 Page 22 of 63

Debtor 1 Kenneth Tyrone Henders	son	Case number (if known)		
First Name Middle N	Name Last Name			
Debtor 2 Sheila Ann Henderson				
First Name Middle N	Name Last Name			
2.2 Chase Mortgage	Describe the property that secures the claim:	¢220 500 00	¢424 200 00	¢0.00
2.2 Chase Mortgage Creditor's Name		\$330,580.00	\$431,300.00	\$0.00
Croation 5 Harris	7532 Tynewind Dr. Wake Forest, NC 27587-4959 Wake County			
	Residence			
	Purchase Date: 9/28/2010			
	Purchase Price: \$475,000.00 Tax Value: \$454,288.00			
	SC(1): Chase			
Attn: Managing Agent	` '			
Mail Code LA4 5555 700	Amt: \$330,580.00 As of the date you file, the claim is: Check all that			
Kansas Ln	apply.			
Monroe, LA 71203	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	<u> </u>			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community debt				
Opened				
09/10 Last				
Active				
Active				
Date debt was incurred 2/28/20	Last 4 digits of account number 1005			
	Last 4 digits of account number 1005			
Date debt was incurred 2/28/20  Marriott Vacations	Last 4 digits of account number			
	Last 4 digits of account number 1005  Describe the property that secures the claim:	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2 3 Marriott Vacations		\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name	Describe the property that secures the claim:  Marriott Timeshare	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name Attn: Bankruptcy/Managing	Describe the property that secures the claim:	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name Attn: Bankruptcy/Managing Agent	Describe the property that secures the claim:  Marriott Timeshare  SC(1): Marriott Vacations  Amt: \$18,127.00  As of the date you file, the claim is: Check all that	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd.	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd.	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$18,127.00	\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or see		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or see		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien)		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien)		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 07/18 Last	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another Check if this claim relates to a community debt  Opened 07/18 Last Active	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 07/18 Last	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another Check if this claim relates to a community debt  Opened 07/18 Last Active	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)		\$0.00	\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 07/18 Last Active Date debt was incurred 2/26/20	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number  0153	ecured		\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 07/18 Last Active Date debt was incurred 2/26/20	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number  0153			\$18,127.00
Date debt was incurred 2/28/20  2.3 Marriott Vacations Worldwide Creditor's Name  Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 07/18 Last Active Date debt was incurred 2/26/20	Describe the property that secures the claim:  Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number  0153	ecured	00	\$18,127.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1	Kenneth Tyrone Henderson			Case number (if known)	
	First Name	Middle Name	Last Name		
Debtor 2	Sheila Ann Hende	erson			
	First Name	Middle Name	Last Name		

Fill in	this informat	tion to identify your case:	:	
Debto				
Debio		Kenneth Tyrone Hende	BISON  Middle Name  Last Name	
Debto	r 2	Sheila Ann Henderson		
(Spouse	e if, filing)	First Name	Middle Name Last Name	
United	d States Bankı	ruptcy Court for the: EA	STERN DISTRICT OF NORTH CAROLINA	
Case	number			
(if know	n)			Check if this is an
			a	mended filing
Offic	ial Form	106F/F		
			Have Unsecured Claims	12/15
			t 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY clai	
Schedu Schedu left. Att	ıle G: Executor ıle D: Creditors	y Contracts and Unexpired L Who Have Claims Secured I uation Page to this page. If y	could result in a claim. Also list executory contracts on Schedule A/B: Property (Offici .eases (Official Form 106G). Do not include any creditors with partially secured claims by Property. If more space is needed, copy the Part you need, fill it out, number the en rou have no information to report in a Part, do not file that Part. On the top of any addit	that are listed in tries in the boxes on the
Part 1	List All o	f Your PRIORITY Unsecu	red Claims	
	•	have priority unsecured clai	ms against you?	
	No. Go to Part	2.		
	l <sub>Yes.</sub>			
Part 2	l ist ΔII o	f Your NONPRIORITY Un	secured Claims	
		have nonpriority unsecured		
_			•	
	No. You nave i	nothing to report in this part. So	ubmit this form to the court with your other schedules.	
	Yes.			
un tha	secured claim, I	ist the creditor separately for e	in the alphabetical order of the creditor who holds each claim. If a creditor has more that each claim. For each claim listed, identify what type of claim it is. Do not list claims already incommerce other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
				Total claim
4.1	Janice Bar	nacki	Last 4 digits of account number	\$20,000.00
		reditor's Name tern Meadows Drive	When was the debt incurred?	_
	Flushing, N	MI 48433 et City State Zip Code	As of the date year file the claim in Obest all that such	
		d the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 o		☐ Contingent	
	Debtor 2 of	•		
	_	and Debtor 2 only	☐ Unliquidated ☐ Disputed	
		•	Type of NONPRIORITY unsecured claim:	
		ne of the debtors and another		
	debt	his claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim	subject to offset?	report as priority claims	
	■ No		$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		Other. Specify Business Loan	_
			·	

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	2 Sheila Ann Henderson	Case number (if known)	
4.2	Bank of America	Last 4 digits of account number 3274	\$36,714.45
	Nonpriority Creditor's Name Attn: Managing Agent PO Box 982234	When was the debt incurred?	
	EI Paso, TX 79998-2234  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC	
4.3	Barrett Properties Nonpriority Creditor's Name	Last 4 digits of account number	\$93,000.00
	1775 Graham Ave., Ste. 201 Henderson, NC 27536	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	□ Student loans	
	Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC	
4.4	BB&T (Truist Bank)	Last 4 digits of account number 0002	\$36,212.67
	Nonpriority Creditor's Name Attn: Managing Agent 214 N Tryon St	When was the debt incurred?	
	Charlotte, NC 28202  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Business Debt of Pineapple Ventures, LLC	

	Kenneth Tyrone Henderson     Sheila Ann Henderson		Case number (if known)		
4.5	BB&T (Truist Bank)	Last 4 digits of account number	0003	\$7,722.97	
	Nonpriority Creditor's Name Attn: Managing Agent 214 N Tryon St	When was the debt incurred?			
	Charlotte, NC 28202 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Business De	ebt of Pineapple Ventures, LLC		
4.6	BB&T (Truist Bank) Nonpriority Creditor's Name	Last 4 digits of account number	\$10,500.00		
	Attn: Managing Agent 214 N Tryon St Charlotte, NC 28202	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim i			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only				
	Debtor 2 only				
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC Credit Card			
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	5494	\$148.00	
	Attn: Managing Agent PO Box 30285	When was the debt incurred?	Opened 05/16 Last Active 2/28/20		
	Salt Lake City, UT 84130  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only				
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit Card			

	or 1 Kenneth Tyrone Henderson Sheila Ann Henderson	Case number (if known)				
4.8	Chase Card Services	Last 4 digits of account number	2276	\$13,088.00		
	Nonpriority Creditor's Name Attn: Bankruptcy/Managing Agent PO Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim in				
	Who incurred the debt? Check one.	7.5 or 11.6 date <b>7</b> 00 me, 11.6 date.	or chook an inat apply			
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card				
4.9	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	1859	\$13.00		
	Attn: Bankruptcy/Managing Agent PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 9/15/17 Last Active 3/11/20			
	Number Street City State Zip Code  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.					
	Debtor 1 only					
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	$\square$ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card				
4.1	Citi Card to CBNA  Nonpriority Creditor's Name	Last 4 digits of account number		\$11,970.00		
	Attn: Managing Agent PO Box 6500	When was the debt incurred?				
	Sioux Falls, SD 57117  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	7.5 or 11.6 date <b>7</b> 00 me, 11.6 date.	or chook all that apply			
	☐ Debtor 1 only	☐ Contingent				
	□ Debtor 2 only □ Unliquidated					
	■ Debtor 1 and Debtor 2 only					
	■ Debtor 1 and Debtor 2 only  □ Disputed  Type of NONPRIORITY unsecured claim:					
	$\square$ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts ebt of Pineapple Ventures, LLC			
	☐ Yes					

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Hurman E. Fry	Last 4 digits of account number	\$2,500.0
Nonpriority Creditor's Name 1902 Laurel Oak Drive	When was the debt incurred?	
Flint, MI 48507		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	-	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Loan	
GFD Management, Inc.	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name		
Attn: Managing Agent 6350 Quadrangle Dr., Ste. 205	When was the debt incurred?	
Chapel Hill, NC 27517		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Defaulted Lease	
IRH Capital, LLC	Last 4 digits of account number 9237	\$16,677.4
Nonpriority Creditor's Name		
Attn: Managing Agent 707 Skokie Blvd., Ste. 555	When was the debt incurred?	
Northbrook, IL 60062		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC	

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or 2 Sheila Ann Henderson	Case number (if known)				
Little Caesars Franchise Group	Last 4 digits of account number	\$450,000.00			
Nonpriority Creditor's Name Attn: Managing Agent 2211 Woodward Ave. Detroit, MI 48201	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Business Debt				
Marlin Business Bank	Last 4 digits of account number 5002	\$52,265.60			
Nonpriority Creditor's Name Attn: Managing Agent PO Box 1626	When was the debt incurred?	Ψ02,200.0			
Mount Laurel, NJ 08054  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC				
Navitas Finance Corp.	Last 4 digits of account number1476	\$76,311.1			
Nonpriority Creditor's Name Attn: Managing Agent 203 Ft. Wade Rd., Ste. 300	When was the debt incurred?				
Ponte Vedra, FL 32081  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
☐ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ Other. Specify Business Debt of Pineapple Ventures, LLC				

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Javad Neakta	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name		
PO Box 4694	When was the debt incurred?	
Chapel Hill, NC 27515	- Assistant and the state of th	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	_	
	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC	
Sterling National Bank	Last 4 digits of account number 4000	\$29,194.1
Nonpriority Creditor's Name	Last 4 digits of account number 4000	Ψ29,194.1
Attn: Managing Agent	When was the debt incurred?	
One Jericho Plaza		
Jericho, NY 11753	_	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC	
Sterling National Bank	Last 4 digits of account number 5000	\$65,000.0
Nonpriority Creditor's Name		
Attn: Managing Agent	When was the debt incurred?	
One Jericho Plaza		
Jericho, NY 11753  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Officer all that apply	
Debtor 1 only	Continued.	
Debtor 2 only	Contingent	
	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Business Debt of Pineapple Ventures, LLC	

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	or 1 Kenneth Tyrone Henderson Or 2 Sheila Ann Henderson	Case number (if known)				
4.2 0	Sterling National Bank	Last 4 digits of account number	3000	\$24,733.37		
	Nonpriority Creditor's Name Attn: Managing Agent One Jericho Plaza Jericho, NY 11753	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Business De	ebt of Pineapple Ventures, LLC			
4.2 1	Synchrony Bank/Sams Club  Nonpriority Creditor's Name	Last 4 digits of account number	7124	\$186.00		
	Attn: Bankruptcy/Managing Agent PO Box 965060	When was the debt incurred?	Opened 05/18 Last Active 3/05/20			
	Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only					
		☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
	At least one of the debtors and another	Student loans	a Claim.			
	☐ Check if this claim is for a community debt		☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	iration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card				
4.2	UNC Health Care	Last 4 digits of account number	9710	\$347.00		
	Nonpriority Creditor's Name Attn: Managing Agent 700 Eastowne Drive	When was the debt incurred?				
	Chapel Hill, NC 27514-2293  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.	,	or chook an mar apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	= '			
	☐ Yes	Other. Specify Medical Deb	ot			

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Debtor Debtor	<ul><li>1 Kenneth Tyrone Henderson</li><li>2 Sheila Ann Henderson</li></ul>		Case number (if known)	
4.2	US Bank/RMS CC	Last 4 digits of account number	3997	\$1,504.00
	Nonpriority Creditor's Name Attn: Bankruptcy/Managing Agent PO Box 5229 Cincinnati, OH 45201 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 05/00 Last Active 2/07/20 is: Check all that apply	-
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separation of the control of the c	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card		_
4.2			0740	
4	US Bank/RMS CC  Nonpriority Creditor's Name	Last 4 digits of account number	6718	\$7,700.00
	Attn: Bankruptcy/Managing Agent PO Box 5229	When was the debt incurred?		-
	Cincinnati, OH 45201			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Continuent		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Business D	ebt of Pineapple Ventures, LLC	_
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed		
is tryi have i	nis page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor in at you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agenc	y here. Similarly, if you
	nd Address (Truist Bank)	On which entry in Part 1 or Part 2 did you	_	•
	(Truist Bank) Dawn Webb		Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured	
	Brookside Pkwy, Ste 150	-	Part 2: Creditors with Nonpriority Unsecured	Claims
Alphar	retta, GA 30022	Last 4 digits of account number		
		Last 4 digits of account number		
	nd Address (Truist Bank)	On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one):	ı list the original creditor? I Part 1: Creditors with Priority Unsecured Cla	ime
	Managing Agent	_	Part 2: Creditors with Nonpriority Unsecured	
-	S. Main St.		- Tart 2. Orearors with Northholicy ensecured	Oldinio
vvake	Forest, NC 27587	Last 4 digits of account number		
Name a	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	(Truist Bank)	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Cla	ims
	Managing Agent S. Main St.		Part 2: Creditors with Nonpriority Unsecured	Claims
	Forest, NC 27587			

Official Form 106 E/F

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Debtor 1 Kenneth Tyrone Henderson  Debtor 2 Sheila Ann Henderson		Case number (if known)
	Last 4 digits of account number	
Name and Address BB&T (Truist Bank)	On which entry in Part 1 or Part 2 die Line 4.5 of ( <i>Check one</i> ):	d you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Dawn Webb 3750 Brookside Pkwy, Ste 150		Part 2: Creditors with Nonpriority Unsecured Claims
Alpharetta, GA 30022	Last 4 digits of account number	
Name and Address CT Lien Solutions	On which entry in Part 1 or Part 2 die Line <u>4.4</u> of ( <i>Check one</i> ):	d you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Managing Agent PO Box 29071 Glendale, CA 91209-9071		■ Part 2: Creditors with Nonpriority Unsecured Claims
Gieridale, CA 31203-3071	Last 4 digits of account number	
Name and Address CT Lien Solutions Attn: Managing Agent PO Box 29071 Glendale, CA 91209-9071	On which entry in Part 1 or Part 2 did Line 4.5 of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address IRH Financial Attn: Managing Agent 707 Skokie Blvd.	On which entry in Part 1 or Part 2 did Line 4.13 of ( <i>Check one</i> ):	d you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Northbrook, IL 60062	Last 4 digits of account number	
Name and Address Marlin Business Bank Attn: Antoinette Vasquez	On which entry in Part 1 or Part 2 did Line 4.15 of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 1626 Mount Laurel, NJ 08054	Last 4 digits of account number	5002
Name and Address Marlin Business Bank	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):	d you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Managing Agent 2795 E. Cottonwood Pkwy Salt Lake City, UT 84121		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Navitas Financing Corp	On which entry in Part 1 or Part 2 did Line 4.16 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Keith Rabin 201 Executive Center Dr., Ste. 100 Columbia, SC 29210		■ Part 2: Creditors with Nonpriority Unsecured Claims
Goldfibla, GG 23210	Last 4 digits of account number	
Name and Address Tracy Shuman, VP 2211 Woodward Ave.	On which entry in Part 1 or Part 2 die Line 4.14 of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Detroit, MI 48201	Last 4 digits of account number	
Name and Address Sterling National Bank Attn: Julie Billelo One Jericho Plaza Jericho, NY 11753	On which entry in Part 1 or Part 2 die Line 4.18 of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	4000
Name and Address Sterling National Bank Attn: Julie Billelo One Jericho Plaza	On which entry in Part 1 or Part 2 die Line 4.19 of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Kenneth Tyrone Henderson Debtor 2 Sheila Ann Henderson	Case number (if known)				
Jericho, NY 11753	Last 4 digits of account number	5000			
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?			
Sterling National Bank	Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Attn: Julie Billelo One Jericho Plaza Jericho, NY 11753		Part 2: Creditors with Nonpriority Unsecured Claims			
55115116, 141 11766	Last 4 digits of account number	3000			
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?			
US Bank/RMS CC	Line 4.24 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Attn: Bankruptcy/Managing Agent 1310 Madrid Street Marshall, MN 56258		■ Part 2: Creditors with Nonpriority Unsecured Claims			
·	Last 4 digits of account number				

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 955,787.74
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 955,787.74

Fill in this inform	Fill in this information to identify your case:						
Debtor 1	Kenneth Tyrone H	enderson Middle Name	Last Name				
Debtor 2	Sheila Ann Hende		Lastivanie				
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT C	F NORTH CAROLINA				
Case number					☐ Check if this is an amended filing		

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Oldic	Zii Oodc	
0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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Fill in th	is information to identify your case:		
Debtor 1	Kenneth Tyrone Henderson		
200101	First Name Middle Name	Last Name	
Debtor 2	Sheila Ann Henderson		
(Spouse if,	filing) First Name Middle Name	Last Name	
United S	tates Bankruptcy Court for the: EASTERN DISTRIC	CT OF NORTH CAROLINA	
Case nui	mber		
(if known)			☐ Check if this is an
			amended filing
people au	rs are people or entities who are also liable for any re filing together, both are equally responsible for s and number the entries in the boxes on the left. At ne and case number (if known). Answer every ques	supplying correct information. If nation it acts the Additional Page to this p	nore space is needed, copy the Additional Page,
	o you have any codebtors? (If you are filing a joint ca		debtor.
Y	es		
	lithin the last 8 years, have you lived in a communitona, California, Idaho, Louisiana, Nevada, New Mexico		
■ N	o. Go to line 3.		
_	es. Did your spouse, former spouse, or legal equivalen	nt live with you at the time?	
		•	
in lir Forn	olumn 1, list all of your codebtors. Do not include yne 2 again as a codebtor only if that person is a guan 106D), Schedule E/F (Official Form 106E/F), or ScColumn 2.	arantor or cosigner. Make sure yo	u have listed the creditor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code		lumn 2: The creditor to whom you owe the debt eck all schedules that apply:
3.1	Ronald & Stefanie Crawford 924 Fulworth Ave. Wake Forest, NC 27587 Jointly liable on some of business debt		Schedule D, line Schedule E/F, line Schedule G

Schedule H: Your Codebtors

Fill	in this information to identify your c	ase:				
De	btor 1 Kenneth Tyre	one Henderson		_		
1	btor 2 Sheila Ann H	lenderson		_		
Un	ited States Bankruptcy Court for the	: EASTERN DISTRICT	OF NORTH CAROLINA	_		
	se number nown)		-		ck if this is: An amende A suppleme	d filing ent showing postpetition chapter
$\sim$	fficial Form 1061			•	13 income a	as of the following date:
	fficial Form 106I			1	MM / DD/ Y	YYY
S	chedule I: Your Inc	ome				12/15
atta	ouse. If you are separated and you che a separate sheet to this form.  Tt 1: Describe Employment					
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse
	If you have more than one job,	Employment status	☐ Employed		☐ Employed	
	attach a separate page with information about additional	Employment status	■ Not employed		■ Not employed	
	employers.	Occupation				
	Include part-time, seasonal, or self-employed work.	Employer's name				
	Occupation may include student or homemaker, if it applies.	Employer's address				
		How long employed t	here?		_	
Pa	rt 2: Give Details About Mo	nthly Income				
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for a	any line, writ	e \$0 in the	space. Include your non-filing
	ou or your non-filing spouse have meet space, attach a separate sheet to		ombine the information for all e	mployers for	that perso	n on the lines below. If you need
				For De	btor 1	For Debtor 2 or

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

		For Debtor 1			Debtor 2 or -filing spouse
2.	\$	0.00		\$	0.00
3.	+\$	0.00		+\$	0.00
4.	\$	0.00		\$	0.00

Schedule I: Your Income Official Form 106I page 1

Copy line 4 here	Debi	tor 1 tor 2	Kenneth Tyrone Henderson Sheila Ann Henderson	_	Ca	se number (if known)				
Copy line 4 here					F	or Debtor 1				
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for terment fund loans 5c. Voluntary contributions for terminary contributions from an unmarried partner, members of your household, your dependents, your roommates, and collect finds of relatives.  5c. \$ 0.00 \$ 0.		Сор	y line 4 here	4.	\$	0.00				
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for terment fund loans 5c. Voluntary contributions for terminary contributions from an unmarried partner, members of your household, your dependents, your roommates, and collect finds of relatives.  5c. \$ 0.00 \$ 0.	5.	List	all payroll deductions:							
S. S.   Mandatory contributions for retirement plans   S. S.   0.00   \$ 0.00				5a.	\$	0.00	\$		0.00	
5c. Voluntary contributions for retirement plans 5d. 8c. 0.00 \$ 0.00 5d. Insurance 5d. 8c. 0.00 \$ 0.00 5e. Insurance 5d. 8c. 0.00 \$ 0.00 5e. Insurance 5d. 8c. 0.00 \$ 0.00 5d. 0.00 5d		5b.	Mandatory contributions for retirement plans	5b.	\$		\$			-
56. Required repayments of retirement fund loans 56. In Sumance 56. S 0.00 \$ 0.00 56. Domestic support obligations 57. S 0.00 \$ 0.00 58. Union dues 58. S 0.00 \$ 0.00 59. S 0.00 50. Other deductions. Specify: 58. S 0.00 \$ 0.00 59. S 0.00 59. S 0.00 59. S 0.00 50. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. S 0.00 \$ 0.00 60. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. S 0.00 \$ 0.00 61. Calculate total monthly take-home pay. Subtract line 6 from line 4. 62. To Calculate total monthly take-home pay. Subtract line 6 from line 4. 63. Net income from rental property and from operating a business, profession, or farm 64. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 65. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 66. S 0.00 \$ 0.00 67. Calculate monthly income sassistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Program) or housing subsidies. 68. Social Security or receive long the sassistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Program) or housing subsidies. 69. Pension or retirement income 69. Social Security long the entire surface that you receive, such as food stamps (benefits under the Supplemental Program) or housing subsidies. 60. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 61. Calculate monthly income. Specify: 61. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 62. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses		5c.		5c.	\$		\$			-
5f. bomestic support obligations 5g. Union dues 5g. Union dues 5g. Union dues 5g. Union dues 5g. Sp. Other deductions. Specify: 5h. Sp. Other deductions. Specify: 5h. Sp. Other deductions. Specify: 5h. Sp. Other deductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5f+5g+5h. 6. \$0.00 \$0.00  Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$0.00  List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipits, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Sp. 0.00 \$0.00  8c. Sp. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance has look acturps (penetis under the Supplemental Nutrition Assistance Program) or housing subsidies.  8d. Unemployment compensation 8d. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 9, Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9, \$2,445.00 \$3,598.63 = \$6,043.63  10. Calculate monthly income. Specify: 11. +\$ 0.00  Local Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9, \$2,445.00 \$3,598.63 = \$6,043.63  Combined monthly income. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it is \$6,043.63		5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	
5g. Union dues  5h. Other deductions. Specify:  5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  6. \$ 0.00 \$ 0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 0.00 \$ 0.00  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  8d. Social Security  8e. \$ 2,445.00 \$ 2,223.00  8d. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8g. \$ 0.00 \$ 0.00  8g. Social Security  8g. \$ 0.00 \$ 0.00  8g. Social Security  8g. \$ 0.00 \$ 0.00  9g. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9g. \$ 0.00 \$ 0.00  9g. Add all other income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included i		5e.	Insurance	5e.	\$	0.00	\$		0.00	-
5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5h+5h.  6. \$ 0.00 \$ 0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 0.00 \$ 0.00  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ 1,375.63  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 2,445.00 \$ 3,598.63  10. Calculate monthly income. Add lines 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other finends or relatives.  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	-
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 0.00  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Unemployment compensation 8d. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8pecify:  8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. \$ 0.00 \$g. \$ 0		5g.		5g.	\$	0.00	\$		0.00	_
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 0.00  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or fram and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive Include cain property settlement.  8f. Unemployment compensation  8g. \$ 0.00 \$ 0.00  8g. \$ 2,445.00 \$ 2,223.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (henefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8h. \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 2,445.00 \$ 3,598.63 = \$ 6,043.63  10. Calculate monthly income. Add line 7 + line 9.  10. \$ 2,445.00 \$ 1,375.63  11. \$ 3,598.63 = \$ 6,043.63  Combined monthly income. Specify:  11. \$ 154a all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  12. \$ 6,043.63  Combined monthly income.  13. Do you expect an increase or decrease within the year after you file this form?		5h.	Other deductions. Specify:	5h.+	+ \$	0.00	+ \$		0.00	-
8. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8d. \$ 0.00 \$ 0.00  8e. Social Security 8e. \$ 2,445.00 \$ 2,223.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8g. \$ 0.00 \$ 1.375.63  8h. Other monthly income. Add lines 8a+8b+8c+8c+8e+8f+8g+8h.  9. \$ 2,445.00 \$ 3.598.63  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. \$ 6,043.63	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		0.00	-
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance at the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8g. \$ 0.00 \$ 0.00  8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 2.445.00 \$ 3.598.63  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. State all other regular contributions to the expenses that you list in Schedule J. Specify:  12. 6.043.63  Combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  10. Do you expect an increase or decrease within the year after you file this form?	7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		0.00	
8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00  8e. Social Security 10th government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8f. 0.00 \$ 0.00  8g. Pension or retirement income 8g. \$ 0.00 \$ 1,375.63  8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 1,375.63  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,445.00 \$ 3,598.63  10. Calculate monthly income. Add line 7 + line 9. 10. \$ 2,445.00 \$ 3,598.63 \$ \$ 6,043.63  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it propriets and Schedules and Statistical Summary of Certain Liabilities and Related Data, if it propriets and Schedules and Statistical Summary of Certain Liabilities and Related Data, if it propriets and Schedules and Statistical Summary of Certain Liabilities and Related Data, if it propriets and Schedules and Statistical Summary of Certain Liabilities and Related Data, if it propriets and Schedules and Schedules and Statistical Summary of Certain Liabilities and Related Data, if it propriets and Schedules and Schedules and Schedules Sc	8.		Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	8a.	\$	0.00	\$		0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8g. \$ 0.00 \$ 1,375.63  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ 3,598.63   10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 2,445.00 \$ 3,598.63  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 6,043.63		8b.								-
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8g. \$ 0.00 \$ 1,375.63  8h. Other monthly income. Specify:  8h. + \$ 0.00 + \$ 0.00  9. Add all other income. Add line 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 2,445.00 \$ 3,598.63  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.		8c.	regularly receive Include alimony, spousal support, child support, maintenance, divorce	t	\$		\$			-
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. + \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,445.00 \$ 3,598.63  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.		8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	-
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8g. \$ 0.00 \$ 1,375.63 8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,445.00 \$ 3,598.63  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income  No.		8e.	Social Security	8e.	\$	2,445.00	\$	2,	223.00	-
8h. Other monthly income. Specify:  8h. \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			0.00				_
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\frac{2,445.00}{\$}\$\$ \$\frac{3,598.63}{\$}\$\$ = \$\frac{6,043.63}{6,043.63}\$\$  10. Calculate monthly income. Add line 7 + line 9.  10. \$\frac{2,445.00}{\$}\$ + \$\frac{3,598.63}{\$}\$ = \$\frac{6,043.63}{6,043.63}\$\$  11. State all other regular contributions to the expenses that you list in Schedule J.  12. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  13. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  14. \$\frac{11.}{\$}\$ \$\frac{1}{\$}\$ \$0.00\$  15. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  16. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  16. Combined monthly income  17. Do you expect an increase or decrease within the year after you file this form?		-			,		· · —	1,3		-
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income  No.		8h.	Other monthly income. Specify:	8h.+	+ \$	0.00	+ \$		0.00	-
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> .  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies  Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?  No.	9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,445.00	\$	3	,598.63	3
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 6,043.63  Combined monthly income  No.	10.			10. \$		2,445.00 + \$_	3,5	98.63	= \$	6,043.63
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 6,043.63    Combined monthly income  No.	11.	Incluothe Do r	ude contributions from an unmarried partner, members of your household, you or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	r depen						0.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 6,043.63    Combined monthly income  No.	10	ادلم ۸	the emount in the last column of line 40 to the emount in line 44. The re-	oult : o +1	ho -	ombined menthlest	nom.	Γ		
13. Do you expect an increase or decrease within the year after you file this form?  ■ No. monthly income	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certa						\$	6,043.63
13. Do you expect an increase or decrease within the year after you file this form?  No.								L		
☐ Yes. Explain:	13.	Do y	•	1?					monthly	y income
			Yes. Explain:							

Official Form 106l Schedule I: Your Income page 2

	in this informa	ation to identify ye				Ī		
		ation to identify yo						
Deb	tor 1	Kenneth Tyro	ne Hende	erson		Che □	ck if this is:  An amended filing	
	tor 2 ouse, if filing)	Sheila Ann H	enderson				A supplement show	wing postpetition chapter the following date:
Unite	ed States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF NORTH	CAROLINA		MM / DD / YYYY	
1	e number nown)							
		orm 106J	_					
Be a info nun	as complete ormation. If n nber (if know		s possible. eded, atta	If two married people ar				
Part 1.	t 1: Desc Is this a joi	ribe Your House nt case?	hold					
	□ No. Go to							
	Yes. Doe	es Debtor 2 live	in a separa	ate household?				
	■ N	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Del	otor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
3.	expenses of	penses include of people other to d your depende	han 🖂	No Yes				☐ Yes
exp	imate your e	a date after the l	our bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedul</i> e	orm as a s J, check t	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$	2,443.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
	•	e maintenance, re				4c.	\$	150.00
_		eowner's associat				4d.	·	25.00
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

Deb	tor 1 Ker	nneth Tyrone Henderson			
Deb	tor 2 She	eila Ann Henderson	Case num	ber (if kr	nown)
6.	Utilities:				
о.		ctricity, heat, natural gas	6a.	\$	250.00
		ter, sewer, garbage collection	6b.		70.00
		ephone, cell phone, Internet, satellite, and cable services	6c.	· —	0.00
		er Specify: Cell phone	6d.	·	180.00
		curity System		\$	83.00
		ble/Internet/Phone		\$ —	166.00
7.		housekeeping supplies		·	900.00
8.		and children's education costs	8.	\$	0.00
9.		laundry, and dry cleaning	9.	\$	150.00
	_	care products and services	10.		175.00
11.		nd dental expenses	11.	\$	200.00
12.	Transport	tation. Include gas, maintenance, bus or train fare.		· —	
		lude car payments.	12.		300.00
		ment, clubs, recreation, newspapers, magazines, and books	13.		100.00
		e contributions and religious donations	14.	\$	0.00
15.	Insurance				
		lude insurance deducted from your pay or included in lines 4 or 20.	150	œ.	204.02
	15a. Life	insurance	15a. 15b.	· —	201.63
		nicle insurance	15b. 15c.	,	0.00
			15d.	· —	200.00
16		er insurance. Specify: onot include taxes deducted from your pay or included in lines 4 or 20.	130.	Φ	0.00
10.	Specify:	o not include taxes deducted from your pay of included in lines 4 of 20.	16.	\$	0.00
17.		nt or lease payments:		* —	0.00
		payments for Vehicle 1	17a.	\$	300.00
		payments for Vehicle 2	17b.	\$	0.00
	17c. Oth	er. Specify:	17c.	\$	0.00
		er. Specify:	17d.	\$	0.00
18.	Your payr	ments of alimony, maintenance, and support that you did not report as			
	deducted	from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· —	0.00
19.		ments you make to support others who do not live with you.		\$	0.00
	Specify:		19.	_	
20.		I property expenses not included in lines 4 or 5 of this form or on Sche			
		tgages on other property al estate taxes	20a. 20b.	· —	0.00
			20b. 20c.		0.00
		perty, homeowner's, or renter's insurance ntenance, repair, and upkeep expenses	20d.	·	0.00
		neowner's association or condominium dues	20d. 20e.	· —	0.00
21.		ecify: Contingency	206.		25.00
۷۱.	Miscellar			+\$ _	100.00
	Miscellal	leous		-Ψ	100.00
22.	Calculate	your monthly expenses			
	22a. Add I	ines 4 through 21.		\$	6,018.63
	22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add I	ine 22a and 22b. The result is your monthly expenses.		\$	6,018.63
22	Coloulata	your monthly not income			<u> </u>
23.		your monthly net income. by line 12 (your combined monthly income) from Schedule I.	23a.	Φ.	6.043.63
		by your monthly expenses from line 22c above.	23b.		6,043.63
	20b. Oop	y your monthly expenses from the 22e above.	200.		0,018.03
		stract your monthly expenses from your monthly income.  e result is your <i>monthly net income</i> .	23c.	\$	25.00
24.	For example	expect an increase or decrease in your expenses within the year after you, e, do you expect to finish paying for your car loan within the year or do you expect your not to the terms of your mortgage?  Explain here: Debtors are currently providing childcare as a restant.	mortgage	payment	t to increase or decrease because of a

Fill in this inf	formation to identify your			
	formation to identify your			
Debtor 1	Kenneth Tyrone H	enderson Middle Name	Last Name	
Debtor 2	Sheila Ann Hende		Zast Namo	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF NORTH CAROLINA	
Case number				
(if known)				☐ Check if this is an
				amended filing
ou must file	this form whenever you fi	lle bankruptcy schedulen connection with a ba		alse statement, concealing property, or o \$250,000, or imprisonment for up to 20
s	Sign Below			
Did you	pay or agree to pay some	one who is NOT an att	orney to help you fill out bankruptcy f	forms?
■ No				
☐ Yes	s. Name of person			tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
			Di	Colaration, and Signature (Official Form 119)
	enalty of perjury, I declare are true and correct.	that I have read the su	mmary and schedules filed with this o	declaration and
	enneth Tyrone Henders	on	X /s/ Sheila Ann Henders	
	neth Tyrone Henderson		Sheila Ann Henderson	1
Signa	ature of Debtor 1		Signature of Debtor 2	
Date	March 26, 2020		Date _March 26, 2020	

		nation to identify you							
Dec	otor 1	Kenneth Tyrone I	Henderson Middle Name	Last Name					
Deb	otor 2	Sheila Ann Hend							
(Spo	use if, filing)	First Name	Middle Name	Last Name					
Unit	ted States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA					
	se number _								
(if kn	own)				_	theck if this is an mended filing			
	<u>ficial Fo</u>								
Sta	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19			
info	rmation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you				
	<u> </u>	,	rital Status and Where You	ı Lived Before					
1.	What is you	r current marital statu	ıs?						
	<ul><li>Married</li><li>Not mar</li></ul>								
2.	During the last 3 years, have you lived anywhere other than where you live now?								
	_								
	■ No □ Yes. Lis	et all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .				
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
					ity property state or territory				
	■ No								
	_	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).					
Par	t 2 Explai	n the Sources of You	r Income						
	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?			
	□ No								
	_	l in the details.							
			Debtor 1		Debtor 2				
			Sources of income	Gross income	Sources of income	Gross income			
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)			
	last calenda nuary 1 to De	r year: ecember 31, 2019)	☐ Wages, commissions, bonuses, tips	\$270.70	☐ Wages, commissions, bonuses, tips	\$35.00			
			Operating a business		Operating a business				

Official Form 107

Kenneth Tyrone Henderson Debtor 1 Debtor 2 Sheila Ann Henderson Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) \$0.00 \$1,974.75 ☐ Wages, commissions, Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$500.00 \$500.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips Operating a business Operating a business

#### 5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

□ No

Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Social Security	\$7,335.00	Social Security	\$6,669.00
		\$0.00	Pension	\$4,104.00
For last calendar year: (January 1 to December 31, 2019)	Social Security	\$14,478.00	Social Security	\$10,687.00
		\$0.00	Pension	\$16,404.00
For the calendar year before that: (January 1 to December 31, 2018)		\$0.00	Pension	\$17,779.00

#### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

	otor 1 Kenneth Tyrone Henderson		Coo	a numbar (%)		
Dei	otor 2 Sheila Ann Henderson		Cas	e number (if known)		
	Yes. Debtor 1 or Debtor 2 or both have During the 90 days before you filed			l of \$600 or more?		
	☐ No. Go to line 7.					
	☐ Yes List below each credito	or to whom you paid a total domestic support obligation uptcy case.				
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ontrol, or owner of 20% or	eral partners; partne more of their voting	rships of which you securities; and an	u are a genera ly managing a	I partner; corporation gent, including one fo
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
<ul> <li>Within 1 year before you filed for bankruptcy, did you make any payments or transinsider?         Include payments on debts guaranteed or cosigned by an insider.     </li> <li>No</li> </ul>				ny property on ac	count of a de	ebt that benefited an
	☐ Yes. List all payments to an insider  Insider's Name and Address	Dates of payment	Total amount	Amount you	Peacon for	this payment
	insider 5 Name and Address	Dates of payment	paid	still owe	Include credi	
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garnis	hed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
<ul> <li>11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amount accounts or refuse to make a payment because you owed a debt?</li> <li>■ No</li> <li>□ Yes. Fill in the details.</li> </ul>						mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		rty in the possessi	on of an assignee	e for the bene	fit of creditors, a
	Yes					
Offic	al Form 107 Staten	nent of Financial Affairs for Ir	idividuals Filing for B	ankruptcy		page

_	btor 1 Kenneth Tyrone Henderson btor 2 Sheila Ann Henderson		Case number	(if known)	
Pa	rt 5: List Certain Gifts and Contribution	าร			
13.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value
14.	□ No		did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or or	contribut	ion.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
	Friendship Baptist Church 237 Friendship Chapel Rd. Wake Forest, NC 27587		Offerings	2019-2018	\$1,270.00
	Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Hail damage to roof	Include	ibe any insurance coverage for the loss the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property. The property is a second of the loss	Date of your loss	Value of property lost
	Trail damage to root	r endi	ng insurance daim	3/2020	ψ0.00
	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yanvier Law Firm, PLLC 311 East Edenton Street Raleigh, NC 27601 Pineapple Ventures LLC  Janvier Law Firm, PLLC 311 East Edenton Street	iptcy, d prepari preparer	id you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require  Description and value of any property transferred  Attorney Fees  Attorney Fees		Amount of payment \$2,500.00
	Raleigh, NC 27601 Pineapple Ventures LLC				

	otor 1 Kenneth Tyrone Henderson otor 2 Sheila Ann Henderson		Ca	se number (i	if known)					
17.	Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you	rs or to make payments			r transfer any prope	rty to anyone who				
	■ No □ Yes. Fill in the details.									
	Person Who Was Paid Address	Description and variansferred	Description and value of any property transferred			Amount of payment				
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No  Yes. Fill in the details.	usiness or financial affa ade as security (such as	airs? the granting of a sec							
	Person Who Received Transfer Address Person's relationship to you	Description and very property transfer			ny property or received or debts change	Date transfer was made				
	CarMax	2009 Chevrolet I	HHR	\$2,000.00 business	- put into	3/4/2019				
	N/A									
	Jason & Rhonda Henderson	ang	\$10,500.0 business	0 - put into	8/2018					
	Son & Daughter-in-law									
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a sel	f-settled tru	st or similar device	of which you are a				
	Yes. Fill in the details.  Name of trust	Description and	value of the propert	ty transform	nd.	Date Transfer was				
	Name of trust	Description and V	value of the propert	ty transierie	şu .	made				
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Stora	ge Units						
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, assoc No  Yes, Fill in the details.	or other financial accou	nts; certificates of			,				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer				
	Charles Schwab	xxxx-	☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ■ Other IRA	201		\$1,500.00				
	Wells Fargo	XXXX-	☐ Checking 2 ■ Savings ☐ Money Market ☐ Brokerage ☐ Other		19	\$25.00				
						_				

Deb	tor 2	Sheila Ann Henderson	(	Case number (if known)						
	-	ou now have, or did you have within 1 year , or other valuables?	before you filed for bankruptcy, any	safe deposit box or other deposito	ory for securities,					
	<b>.</b>	No								
		Yes. Fill in the details.								
		ne of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had access to it?  Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
22.	Have	you stored property in a storage unit or pl	lace other than your home within 1 y	ear before you filed for bankruptcy	?					
	_	No Yes. Fill in the details.								
		ne of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Par	t <b>9</b> :	Identify Property You Hold or Control for	Someone Else							
	-	to you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust or someone.								
		No								
	_	Yes. Fill in the details.								
	-	ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Pari	10:	Give Details About Environmental Informa	ation							
For t	he pu	rpose of Part 10, the following definitions	apply:							
	toxic	ronmental law means any federal, state, or substances, wastes, or material into the a ations controlling the cleanup of these sul	ir, land, soil, surface water, groundw							
		neans any location, facility, or property as n, operate, or utilize it, including disposal	<u>•</u>	w, whether you now own, operate, o	or utilize it or used					
		rdous material means anything an environ rdous material, pollutant, contaminant, or s		vaste, hazardous substance, toxic s	substance,					
Repo	ort all	notices, releases, and proceedings that yo	ou know about, regardless of when t	hey occurred.						
24.	Has a	any governmental unit notified you that you	u may be liable or potentially liable u	nder or in violation of an environme	ental law?					
	_	No Yes. Fill in the details.								
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have	you notified any governmental unit of any	,							
	_	No								
		Yes. Fill in the details.	Covernmental	Environmental law if you	Data of matica					
	INGIN	e of site	Governmental unit	Environmental law, if you	Date of notice					

Address (Number, Street, City, State and

know it

Address (Number, Street, City, State and ZIP Code)

Debtor 1 Kenneth Tyrone Henderson

Date March 26, 2020

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No
□ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Ouse	20 01040 3 DIVIV	DOC 1 THE	.d 05/25/20 Entered 05/26/20 10	3.21.13	1 age 43 01 00
Fill in this info	ormation to identify your	case:			
Debtor 1	Kenneth Tyrone Ho	enderson			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Sheila Ann Hender	SON Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTR	ICT OF NORTH CAROLINA		
Case number (if known)					Check if this is an amended filing
Stateme	ent of Intentio	n for Indiv	riduals Filing Under Char	oter 7	12/15
	ndividual filing under cha		out this form if:		
	ave claims secured by yo	• • •			
You must file t whic		ithin 30 days after	ot expired. you file your bankruptcy petition or by the dat e time for cause. You must also send copies to		
	people are filing together and date the form.	in a joint case, bot	th are equally responsible for supplying corre	ct informatio	n. Both debtors must
	e and accurate as possib your name and case nur		needed, attach a separate sheet to this form.	On the top o	f any additional pages,
Part 1: List	Your Creditors Who Have	Secured Claims			
		ert 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	erty (Official	Form 106D), fill in the
information Identify the	creditor and the property the	nat is collateral	What do you intend to do with the property secures a debt?		d you claim the property exempt on Schedule C?
Creditor's	Capital One Auto Finar	се	☐ Surrender the property.		No

name: ☐ Retain the property and redeem it. Yes Retain the property and enter into a 2016 Chrysler Town & Country Description of Reaffirmation Agreement. 75,000 miles property ☐ Retain the property and [explain]: SC(1): Capital One securing debt: Amt: \$10,353.00 Creditor's Chase Mortgage ☐ Surrender the property. ☐ No name: ☐ Retain the property and redeem it. Yes Retain the property and enter into a Description of 7532 Tynewind Dr. Wake Forest, Reaffirmation Agreement. NC 27587-4959 Wake County property ☐ Retain the property and [explain]: Residence securing debt: Purchase Date: 9/28/2010 Purchase Price: \$475,000.00 Tax Value: \$454,288.00 SC(1): Chase Amt: \$330,580.00

Creditor's Marriott Vacations Worldwide

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

□ No

	th Tyrone Henderson Ann Henderson	Case number (if kr	nown)
property	Marriott Timeshare SC(1): Marriott Vacations Amt: \$18,127.00	<ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>	■ Yes
	r Unexpired Personal Property Le		(000) (111)
in the information	below. Do not list real estate lease	listed in Schedule G: Executory Contracts and Unex es. Unexpired leases are leases that are still in effect ase if the trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
Describe your un	expired personal property leases		Will the lease be assumed?
Lessor's name: Description of leas Property:	ed		□ No
Lessor's name: Description of leas Property:	ed		□ No
Lessor's name: Description of leas Property:	ed		□ No □ Yes
Lessor's name: Description of leas Property:	ed		□ No □ Yes
Lessor's name: Description of leas Property:	ed		□ No
Lessor's name: Description of leas Property:	ed		□ No
Lessor's name: Description of leas Property:	ed		□ No
Part 3: Sign Be	low		l Tes
	erjury, I declare that I have indicat bject to an unexpired lease.	ted my intention about any property of my estate tha	at secures a debt and any personal
X /s/ Kenneth	Tyrone Henderson	X /s/ Sheila Ann Henderson	
	one Henderson	Sheila Ann Henderson Signature of Debtor 2	
Date Ma	rch 26, 2020	Date March 26, 2020	

Official Form 108

Fill in this info	rmation to identify your case:			lirected in this form and	in Form
Debtor 1	Kenneth Tyrone Henderson		2A-1Supp:		
Debtor 2 (Spouse, if filing)	Sheila Ann Henderson		■ 1. There is no pres	umption of abuse	
	Bankruptcy Court for the: Eastern District of	North Carolina [	applies will be r	to determine if a presur made under <i>Chapter 7 i</i> iicial Form 122A-2).	
Case number (if known)			☐ 3. The Means Test	does not apply now be service but it could ap	
			☐ Check if this is a	in amended filing	
	Form 122A - 1				
Chapter	7 Statement of Your Cur	rent Monthly Inc	ome		12/19
attach a separa case number (if qualifying milita	and accurate as possible. If two married people a te sheet to this form. Include the line number to w known). If you believe that you are exempted fror ary service, complete and file Statement of Exemp alculate Your Current Monthly Income	hich the additional information a n a presumption of abuse becau	pplies. On the top of a se you do not have pri	ny additional pages, writ marily consumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one on	ly.			
	narried. Fill out Column A, lines 2-11.				
☐ Marri	ed and your spouse is filing with you. Fill ou	t both Columns A and B, lines	2-11.		
☐ Marri	ed and your spouse is NOT filing with you.	ou and your spouse are:			
□Liv	ring in the same household and are not lega	Ily separated. Fill out both Col	umns A and B, lines	2-11.	
ре	ring separately or are legally separated. Fill or enalty of perjury that you and your spouse are leading apart for reasons that do not include evading	gally separated under nonban	kruptcy law that appli	es or that you and your	
101(10A). For the 6 months	rerage monthly income that you received from all or example, if you are filing on September 15, the 6-me, and the income for all 6 months and divide the total of the same rental property, put the income from that p	onth period would be March 1 throu by 6. Fill in the result. Do not include	igh August 31. If the amo le any income amount m	ount of your monthly incom ore than once. For examp	ne varied during ble, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
_	oss wages, salary, tips, bonuses, overtime, a eductions).	and commissions (before all	\$	\$	
•	and maintenance payments. Do not include B is filled in.	payments from a spouse if	\$	\$	
of you of from an earth and room	unts from any source which are regularly par r your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular contributions, your dependents, parents,	\$	\$	
5. Net inco	me from operating a business, profession,				
		Debtor 1			
	ceipts (before all deductions)	\$ -\$			
•	and necessary operating expenses	·	\$	\$	
	thly income from a business, profession, or farr ome from rental and other real property	n \$	Ψ	Ψ	
6. Net inco	and nonintental and other real property	Debtor 1			
Gross re	ceipts (before all deductions)	\$			
	and necessary operating expenses	<b>-</b> \$			
-	thly income from rental or other real property	\$ Copy here ->	\$	\$	
	dividends, and royalties		\$	\$	

Official Form 122A-1

Debto	Sheila Ann Henderson	Case number (if known)	
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8.	Unemployment compensation	\$	\$
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you \$ For your spouse \$		
	For your spouse\$		
	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.		\$
	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.		
	•	\$	\$
		\$	\$
	Total amounts from separate pages, if any.	\$	\$
11.	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.		Total current monthly
Part	2: Determine Whether the Means Test Applies to You		income
12.	Calculate your current monthly income for the year. Follow these steps:		
	12a. Copy your total current monthly income from line 11	Copy line 11 h	ere=> \$
	Multiply by 12 (the number of months in a year)		<b>x</b> 12
	12b. The result is your annual income for this part of the form		12b. \$
13.	Calculate the median family income that applies to you. Follow these steps:		
	Fill in the state in which you live.		
	Fill in the number of people in your household.		
	Fill in the median family income for your state and size of household.		13. \$
	To find a list of applicable median income amounts, go online using the link specified for this form. This list may also be available at the bankruptcy clerk's office.	in the separate instruct	ions
14.	How do the lines compare?		
	14a.    Line 12b is less than or equal to line 13. On the top of page 1, check box Go to Part 3. Do NOT fill out or file Official Form 122A-2.	(1, There is no presum	ption of abuse.
	14b.   Line 12b is more than line 13. On the top of page 1, check box 2, <i>The pr</i> Go to Part 3 and fill out Form 122A–2.	resumption of abuse is o	determined by Form 122A-2.
Part	3: Sign Below		
	By signing here, I declare under penalty of perjury that the information on this sta	atement and in any atta	chments is true and correct.
		ila Ann Henderson	
		Ann Henderson e of Debtor 2	
	Date March 26, 2020 Date March 2		

Official Form 122A-1

Kenneth Tyrone Henderson

## Case 20-01340-5-DMW Doc 1 Filed 03/26/20 Entered 03/26/20 16:21:19 Page 53 of 63

Debtor 1 Debtor 2	Kenneth Tyrone Henderson Sheila Ann Henderson	Case number (if known)	
	MM / DD / YYYY  If you checked line 14a, do NOT fill out or file Form 122A-2.	MM/DD/YYYY	
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

n this inform	nation to identify you	r case:		
or 1 _	Cenneth Tyrone Hend	derson		
or 2	Sheila Ann Henderso	n		
	niella Allii i lenderso			
ed States Bar	kruptcy Court for the:	Eastern District of North Carolina		
number _				☐ Check if this is an amended filing
own)				
tement	of Exemption	on from Presumption o	ly Inco	me (Official Form 122A-1), if you believe that you are
sions in this	statement applies to	only one of you, the other person should	d com	olete a separate Form 122A-1 If you believe that this is
1 Ident	ify the Kind of Debts \	You Have		
			terit witi	The answer you gave at line to of the voluntary retition for
			nere is r	no presumption of abuse, and sign Part 3. Then submit this
_ `	. •	aromi izza-i.		
	10 T 411 2.			
2: Deter	mine Whether Military	y Service Provisions Apply to You		
Are you a d	sabled veteran (as de	fined in 38 U.S.C. § 3741(1))?		
□ No. Go	to line 3.			
	,		were p	erforming a homeland defense activity?
☐ No.	Go to line 3.			
☐ Yes.			x 1, <i>The</i>	ere is no presumption of abuse, and sign Part 3. Then
Are you or I	nave you been a Rese	rvist or member of the National Guard?		
□ No. Co	mplete Form 122A-1. [	Do not submit this supplement.		
☐ Yes. W	ere you called to active	duty or did you perform a homeland defen-	se activ	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
☐ No.	Complete Form 122	A-1. Do not submit this supplement.		
☐ Yes.	Check any one of th	e following categories that applies:		
			east	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3 <i>The Means Test does not apply now</i> , and sign Part 3. Ther submit this supplement with the signed Form 122A-1. You
	90 days and was rel	eased from active duty on		are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a
	I am performing a l	nomeland defense activity for at least 90	days.	homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
	I performed a home	eland defense activity for at least 90 day, which is fewer than 540 days be		If your exclusion period ends before your case is closed,
	icial Formulation of the personal, farmulation of the personal	Sheila Ann Henderso   Sheila Ann Henderso	Sheila Ann Henderson use, if filing)  ad States Bankruptcy Court for the: Eastern District of North Carolina e number lown)  icial Form 122A - 1Supp  Attement of Exemption from Presumption o his supplement together with Chapter 7 Statement of Your Current Month pited from a presumption of abuse. Be as complete and accurate as possi sions in this statement applies to only one of you, the other person shoul red by 11 U.S.C. § 707(b)(2)(C).  I Identify the Kind of Debts You Have  Are your debts primarily consumer debts? Consumer debts are defined in a personal, family, or household purpose." Make sure that your answer is consis Individuals Filing for Bankruptcy (Official Form 1).  No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, 77 supplement with the signed Form 122A-1.  Yes. Go to Part 2.  2: Determine Whether Military Service Provisions Apply to You  Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?  No. Go to line 3.  Yes. Did you incur debts mostly while you were on active duty or while you 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).  No. Go to line 3.  Yes. Go to Form 122A-1: on the top of page 1 of that form, check bo submit this supplement with the signed Form 122A-1.  Are you or have you been a Reservist or member of the National Guard?  No. Complete Form 122A-1. Do not submit this supplement.  Yes. Were you called to active duty or did you perform a homeland defense No. Complete Form 122A-1. Do not submit this supplement.  Yes. Check any one of the following categories that applies:  I was called to active duty after September 11, 2001, for at le 90 days and remain on active duty on which is fewer than 540 days before I file this bankruptcy case.  I am performing a homeland defense activity for at least 90 day I performed a homeland defense activity for at least 90 day	Sheila Ann Henderson  as Assets Bankruptcy Court for the: Eastern District of North Carolina  a number looking and States Bankruptcy Court for the: Eastern District of North Carolina  a number looking and the state of the State Bankruptcy Court for the: Eastern District of North Carolina  a number looking and the state Bankruptcy Court for the: Eastern District of North Carolina  a number looking and the state Bankruptcy Court for the: Eastern District of North Carolina  a number looking and the state Bankruptcy Computed From a presumption of Abb  this supplement together with Chapter 7 Statement of Your Current Monthly Inco- pited from a presumption of abuse. Be as complete and accurate as possible. If it is sions in this statement applies to only one of you, the other person should computed by 11 U.S.C. § 707(b)(2)(C).  I Identify the Kind of Debts You Have  Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. for String for Bankruptcy (Official Form 1).  No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is a supplement with the signed Form 122A-1.  Determine Whether Military Service Provisions Apply to You  Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?  No. Go to line 3.  Yes. Did you incur debts mostly while you were on active duty or while you were p 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).  No. Go to line 3.  Yes. Go to Form 122A-1: on the top of page 1 of that form, check box 1, The submit this supplement with the signed Form 122A-1.  Are you or have you been a Reservist or member of the National Guard?  No. Complete Form 122A-1. Do not submit this supplement.  Yes. Were you called to active duty or did you perform a homeland defense active lows. Were you called to active duty after September 11, 2001, for at least 90 days and remain on active duty.  I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on least 10 days.  I performed a homeland defense activity for at least 90

Official Form 122A-1Supp

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Eastern District of North Carolina**

In re	Kenneth Tyrone Henderson Sheila Ann Henderson	Case No.	
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DI	EBTOR(S)
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorompensation paid to me within one year before the filing of the petition in bankruptcy e rendered on behalf of the debtor(s) in contemplation of or in connection with the ba	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	3,000.00
	Prior to the filing of this statement I have received	\$	3,000.00
	Balance Due	\$	0.00
2. \$	0.00 of the filing fee has been paid.		
3. T	he source of the compensation paid to me was:		
	☐ Debtor ☐ Other (specify): Pineapple Ventures LLC		
4. T	he source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	I have not agreed to share the above-disclosed compensation with any other person	n unless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the		
6. In	n return for the above-disclosed fee, I have agreed to render legal service for all aspec	cts of the bankruptcy	ease, including:
b. c.	Analysis of the debtor's financial situation, and rendering advice to the debtor in de Preparation and filing of any petition, schedules, statement of affairs and plan whice Representation of the debtor at the meeting of creditors and confirmation hearing, a [Other provisions as needed] Filing motions to avoid npm security interest in HHG or tools of the trace	th may be required; and any adjourned hea	rings thereof;
7. B	y agreement with the debtor(s), the above-disclosed fee does not include the following Representation of the debtor(s) in any dischargeability actions, including adversary proceedings: representation of the debtor in contested judic proceedings concerning the right of the IRS to continue to garnish or motions to dismiss, representation of the debtor in contested motions to objections to exemptions, filing motions to redeem collateral, 2004 propassisting the debtor in negotiating reaffirmation agreements; If the debtor in negotiating reaffirmation agreements;	ng student loan disc ial or npm lien avoic offset social security for relief from stay; r duction of documen	lance matters; only contested benefits; section 707(b) epresentation of the debtor in ation, 2004 depositions,

Additionally, filing motions to continue 341 creditors meeting and amended schedules as needed (for which a flat fee of \$150.00 shall be paid)

these matters, the debtor shall compensate the attorney at the hourly rate of \$350.00 per hour, unless specifically

provided for otherwise herein.

In re	Kenneth Tyrone Henderson Sheila Ann Henderson	Case No.	
	Debtor(s)		

### **DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

(Continuation Sheet)

	CERTIFICATION		
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in his bankruptcy proceeding.			
March 26, 2020	/s/ William F. Braziel III		
Date	William F. Braziel III 39541		
	Signature of Attorney		
	Janvier Law Firm, PLLC		
	311 East Edenton Street		
	Raleigh, NC 27601		
	919-582-2323 Fax: 866-809-2379		
	Name of law firm		

### **United States Bankruptcy Court Eastern District of North Carolina**

	Kenneth Tyrone Henderson			
In re	Sheila Ann Henderson		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATION OF CREDITOR MATRIX			
The abo	ove-named Debtors hereby verify that	the attached list of creditors is true and	correct to the best	of their knowledge.
Date:	March 26, 2020	/s/ Kenneth Tyrone Hendersor	1	
		Kenneth Tyrone Henderson		
		Signature of Debtor		
Datas	March 26, 2020	/s/ Sheila Ann Henderson		

Sheila Ann Henderson Signature of Debtor Janice Banacki 2424 Western Meadows Drive Flushing, MI 48433

Bank of America Attn: Managing Agent PO Box 982234

El Paso. TX 79998-2234

Barrett Properties 1775 Graham Ave., Ste. 201 Henderson, NC 27536

BB&T (Truist Bank) Attn: Managing Agent 214 N Tryon St Charlotte, NC 28202

BB&T (Truist Bank) Attn: Dawn Webb 3750 Brookside Pkwy, Ste 150 Alpharetta, GA 30022

BB&T (Truist Bank) Attn: Managing Agent 1821 S. Main St. Wake Forest, NC 27587

Capital One Attn: Managing Agent PO Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy/ManagingAgent PO Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Bankruptcy/Managing Agent PO Box 15298 Wilmington, DE 19850 Chase Mortgage Attn: Managing Agent Mail Code LA4 5555 700 Kansas Ln Monroe, LA 71203

Citi Card to CBNA Attn: Managing Agent PO Box 6500 Sioux Falls, SD 57117

CT Lien Solutions Attn: Managing Agent PO Box 29071 Glendale, CA 91209-9071

Hurman E. Fry 1902 Laurel Oak Drive Flint, MI 48507

GFD Management, Inc. Attn: Managing Agent 6350 Quadrangle Dr., Ste. 205 Chapel Hill, NC 27517

IRH Capital, LLC Attn: Managing Agent 707 Skokie Blvd., Ste. 555 Northbrook, IL 60062

IRH Financial Attn: Managing Agent 707 Skokie Blvd. Northbrook, IL 60062

Little Caesars Franchise Group Attn: Managing Agent 2211 Woodward Ave. Detroit, MI 48201

Marlin Business Bank Attn: Managing Agent PO Box 1626 Mount Laurel, NJ 08054 Marlin Business Bank Attn: Antoinette Vasquez PO Box 1626 Mount Laurel, NJ 08054

Marlin Business Bank Attn: Managing Agent 2795 E. Cottonwood Pkwy Salt Lake City, UT 84121

Marriott Vacations Worldwide Attn: Bankruptcy/Managing Agent 1200 Bartow Rd. Lakeland, FL 33801

Navitas Finance Corp. Attn: Managing Agent 203 Ft. Wade Rd., Ste. 300 Ponte Vedra, FL 32081

Navitas Financing Corp Attn: Keith Rabin 201 Executive Center Dr., Ste. 100 Columbia, SC 29210

Javad Neakta PO Box 4694 Chapel Hill, NC 27515

Ronald & Stefanie Crawford 924 Fulworth Ave. Wake Forest, NC 27587

Tracy Shuman, VP 2211 Woodward Ave. Detroit, MI 48201

Sterling National Bank Attn: Managing Agent One Jericho Plaza Jericho, NY 11753 Sterling National Bank Attn: Julie Billelo One Jericho Plaza Jericho, NY 11753

Synchrony Bank/Sams Club Attn: Bankruptcy/Managing Agent PO Box 965060 Orlando, FL 32896

UNC Health Care Attn: Managing Agent 700 Eastowne Drive Chapel Hill, NC 27514-2293

US Bank/RMS CC Attn: Bankruptcy/Managing Agent PO Box 5229 Cincinnati, OH 45201

US Bank/RMS CC Attn: Bankruptcy/Managing Agent 1310 Madrid Street Marshall, MN 56258